Case 23-16277-JNP Doc 95 Filed 11/22/24 Entered 11/22/24 10:21:56 Desc Main Document Page 1 of 2 Fill in this information to identify your case: Ronald G. Pilarchik Debtor 1 Middle Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: District of New Jersey Case number Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date: Official Form 106I MM / DD / YYYY Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: **Describe Employment** 1. Fill in your employment information. Debtor 1 Debtor 2 or non-filing spouse If you have more than one job, attach a separate page with information about additional **Employment status Employed** Employed employers. ☐ Not employed ■ Not employed Include part-time, seasonal, or self-employed work. Supervisor Occupation Occupation may include student or homemaker, if it applies. Employer's name Abatetech Employer's address Number Street Number Street State ZIP Code City State ZIP Code How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 0.00 Calculate gross income. Add line 2 + line 3.

Case 23-16277-JNP Doc 95 Filed 11/22/24 Entered 11/22/24 10:21:56 Desc Main Document

Debtor 1

Ronald G. Pilarchik

Middle Name Last Name Page 2 of 2

Case number (if known)

Copy line 4 here		Theorem	For Debtor 1 \$ 7, 259.08		Ordinary.	For Debto	r 2 or spouse			
					\$	Hermania Vision and exclusion	ires			
5. List all payroll deductions:								-		
5a. Tax, Medicare, and Social Security deductions	5a		. 1	348.5	7.					
5b. Mandatory contributions for retirement plans	5b		P, B			\$		-		
5c. Voluntary contributions for retirement plans	5c.	10	P B	0.0		\$		•		
5d. Required repayments of retirement fund loans	5d.		P 6	0.0						
5e. Insurance	5e.			0.0	_	\$				
5f. Domestic support obligations	5f.			0.0	-	\$				
5g. Union dues		•		0.0		\$				
5h. Other deductions, Specify:	5g. 5h.					\$				
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.		Ψ.		0.0	_	+ \$				
	6.	\$	18	48,5	Le ·	\$				
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	51	10.56	-	\$				
8. List all other income regularly received:										
8a. Net income from rental property and from operating a business, profession, or farm						59				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$		0.00)	\$				
8b. Interest and dividends	8b.	¢		0.00	_					
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	nt	\$ _		0.00	_	\$				
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_		0.00	<u> </u>	\$				
8d. Unemployment compensation	8d.	\$		0.00		\$				
8e. Social Security	8e.	\$		0.00	-	Φ				
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Programment of the Supplement of the Supp	се	_			-	<u> </u>				
Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$		0.00		s				
8g. Pension or retirement income		•		0.00	•	Ψ				
8h. Other monthly income. Specify:	8g.	\$				\$				
	8h.	+\$_		0.00		+\$				
. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$		0.00		\$				
Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$5	14/.0	7.52	+	\$	0.00	= \$_:	541	0.52
State all other regular contributions to the expenses that you list in Schedul Include contributions from an unmarried partner, members of your household, you friends or relatives.	ile J. ur de	pende	ents,	your roc	mma	ates, and othe		L		
Do not include any amounts already included in lines 2-10 or amounts that are no										
Specify:	ot ava	mable	to p	ay expe	nses	listed in Sche				0.00
Add the amount in the last column of line 10 to the amount in line 11. The re Write that amount on the Summary of Your Assets and Liabilities and Certain Sta	esult i	s the	com	oined mo	onthly appli	y income.	11. =	* \$_ \$_	1410	0.00
					,	0.000345	12.		nbined	
. Do you expect an increase or decrease within the year after you file this for No.	m?							mor	nthly in	come
Yes. Explain:										